SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planking and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

REDate Stamp (Received)

JUL 0 2 2021

Bayfield Co.

Permit#: 22	-0036
Date:	3-3-2022
Amount Paid:	\$175 7-8-21
Refund:	Chronium 20 Sept.

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made p				Department. HAVE BEEN ISSUED TO	APPLICANT. Origin	al Application MU	ST be submitted	FILL OUT IN INK	NO PEN	CII)
TYPE OF PERMI				ALL WATER CONTROL OF THE PARTY	ANITARY PRIVY		AL USE SPECIA	***************************************	□ OTHER	
Owner's Name:	47	nc Ai	15 0		Mailing Address:		City/State/Zip:		Telephon	ne:
DANIEL Address of Proper	ty:	DS AC	12 0,	DMZM 1.	541 874h ;	HUNZ	BLAINE, IV	W 55449	123-8	357
N/A						PHONON CONTRACTOR CONT			Cell Phon	ne:
Contractor:				(Contractor Phone:	Plumber:			Plumber	Phone:
Authorized Agent	: (Person Sig	ning Appli	cation on beha	alf of Owner(s))	Agent Phone:	Agent Maili	ng Address (include Cit	y/State/Zip):	Written	
									Authoriza Attached	
PROJECT					Tax ID#	Name and the second	v	Recorded Document:	☐ Yes	
LOCATION	Legal	Descrip	tion: (Use 1	Tax Statement)	34755	5		2020 R	585	072
1/4		1/4	Gov't Lot	Lot(s) CS		SM Doc# Lo	ot(s) # Block #	Subdivision:		
			3		9-264 1	591	4			
Section O	5 , Tow	nship _	4 <u>9</u> n, f	Range <u>09</u> W	Town of:	CIENTA		Lot Size	Acrea	45
					Stream (incl. Intermittent		cture is from Shoreli		Δre	e Wetlands
Shoreland -				of Floodplain?	If yescontinue	70.	00 ft.	feet in Floodpla Zone?	in l	Present?
	□ IS I	Property	/Land Withi	n 1000 feet of Lake	, Pond or Flowage If yescontinue		cture is from Shoreli	f		☐ Yes ■ No
Non-Shorelan	d ·							Teet No		
Value at Time										
of Completion				Project	Project	Total # of bedrooms		hat Type of Sanitary System(s)		Type of
* include donated time		Projec	t	# of Stories	Foundation	on		the property or		Water
& material						property		on the property?		property
		Constru		☐ 1-Story ☐ 1-Story +	☐ Basement		☐ Municipal/Cit	ry Specify Type:		☐ City
\$ 0	☐ Addi	tion/Alt	eration	Loft	☐ Foundation	□ 2		у зреспутуре.		☐ Well
8000	☐ Conv	ersion		☐ 2-Story	□ Slab	□ 3	☐ Sanitary (Exis	ts) Specify Type:		
	Relo	cate (exi	sting bldg)	At grade	2 🗆		☐ Privy (Pit) or	✓ Vaulted (min 20	0 gallon)	
		Busine	ess on		Use	₹ None	☐ Portable (w/s		o ganony	
	Prop		d brading		Year Round	-	☐ Compost Toil☐ None	et		
				1	-					
Proposed Cons				siness is being applie	d for) Length:	250	Width:	Height		
	A Secretary of the Control of the Co	(OTCIO	ii diiiiciisioi	13/	Length.	250	Width: (6	Height	0	
Proposed I	Jse	1			Proposed Struct	ture		Dimensions		quare
	Living and the second		Principal	Structure (first s	tructure on property	/)		(x)	ootage
			Residenc	e (i.e. cabin, hunt	ing shack, etc.)			1250 X 100) 4	1000
☑ Residentia	l Use		/	with Loft with a Porch	X)				
				with (2 nd) Porc	ch		/	(x)	
				with a Deck				(x)	
☐ Commerci	al Use			with (2 nd) Decl with Attached				(X)	
			Bunkhou		or sleeping quarter	rs or \square cooking &	food prep facilities)	(X	,	
					d date)			(X)	
☐ Municipal	Use		Addition	/Alteration (explai	in)			(x)	
				y Building (explain				(x)	
			HILL-THE - IN -I		n/Alteration (expla	in)		(X)	
				se: (explain)	Deland	Maden	9	(x)	
			Other: (e:	nal Use: (explain)/_				(X)	
					STARTING CONSTRUCTION	I WITHOUT A DEDAM	WILL DECLUTING DEALEST			
(are) responsible for t	he detail and	accuracy of	ny accompanyin all information	g information) has been ex I (we) am (are) providing a	xamined by me (us) and to the	best of my (our) knowle	dge and belief it is true, corr	ect and complete. I (we) ackn	Delether with the	and the same
result of Bayfield Cou property at any reaso	nty relying or	this inform	ation I (we) am	(are) providing in or with	this application. I (we) conser	nt to county officials char	ged with administering cour	nty ordinances to have access	to the above d	may be a lescribed
Owner(s):	den	YX2	-		<u> </u>	osalie Of	hien	Date 6-29	21	
		ers listed	on the Deed	All Owners must sign	or letter(s) of authoriza	ition must accompa	ny this application)		,	
Authorized Age	nt:	uı are sigi	ning on beha	of the owner(s) a le	etter of authorization mi			Date		
	(II VC			III OI LIIE OWIIEITSI A II	etter of authorization mi	IST accompany this	applicationi			
Address to send					etter of authorization mi	ust accompany this i	application)	Attach	1	

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: Proposed Construction (2) Show / Indicate: North (N) on Plot Plan

(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)

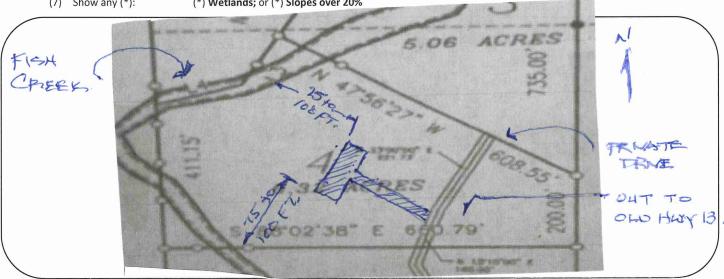
(4)Show: All Existing Structures on your Property

(5) Show: Show any (*): (6)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

Show any (*): (*) Wetlands; or (*) Slopes over 20% (7)



Please complete (1) - (7) above (prior to continuing)

PROPOSED t be TRAILER DRIVE WAY roved by the Planning & Zoning Dept.

Fill Out in Ink - NO PENCIL

(8) Setbacks: (measured to the closest point)

Description	Setback Measureme			Description		ements	
			H.			(-)	
Setback from the Centerline of Platted Road	33 75	Feet		Setback from the Lake (ordinary high-water mark)	751	Feet	
Setback from the Established Right-of-Way	0	Feet		Setback from the River, Stream, Creek	5 45/	Feet 'Feet	
				Setback from the Bank or Bluff	. 1	Feet	
Setback from the North Lot Line	297 :75	Feet					
Setback from the South Lot Line	10 75	> Feet		Setback from Wetland	50	Feet	
Setback from the West Lot Line	246.450	Feet		20% Slope Area on the property	Yes	□ No	
Setback from the East Lot Line		Feet		Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	100	Feet		Setback to Well		Feet	
Setback to Drain Field		Feet					
Setback to Privy (Portable, Composting)		Feet					

Prior to the placement or construction of a structure within ten (10) feet of the minimum r other previously surveyed corner or marked by a licensed surveyor at the owner's expense

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		Sanitary Date:							
Permit Denied (Date):	Reason for Denial:									
Permit #: 22-0030	Permit Date:3-3-	Permit Date 3-3-2022								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Reco	guous Lot(s))	Mitigation Required Mitigation Attached		Affidavit Attached						
Granted by Variance (B.O.A.) See Yes No Case #:		Previously Granted by Yes No	y Variance (B.O.A.) Case	, #:						
Was Parcel Legally Created Was Proposed Building Site Delineated Yes N Yes N	0	Were Property Line	es Represented by Owner Was Property Surveyed	Yes ONO NO						
Inspection Record: 5, te / access room	ed flagged a	vell and no	eoncerns	Zoning District (R2) Lakes Classification (3)						
Date of Inspection: 20 2 (Condition(s): Town, Committee or Board Conditions Att	Inspected by: 6 1	beening 1		Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Att Distorbance must be Kept best management practices a drive way.	ached? Yes No-(If to the minimum to Minimize 2	No they need to be atta arra need a 105 ion. Rere	ached.) I to complete getate disturb	project use and area!						
Signature of Inspector: Todd Urrano	l			Date of Approval: 2-2(-2:						
Hold For Sanitary: Hold For TBA:		davit: 🔲	Hold For Fees:	_						

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 – Washburn, WI 54891 Phone – (715) 373-6138

Fax – (715) 373-0114 e-mail: zoning@bayfieldcounty.org Website: www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)

RECEIVED

JUL 13 2021

Bayfield Co.

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

Property Owner DANIEL & ROSALLE OBRIEN Property Address Telephone 163-438-3257 Accurate Legal Description involved in this request (specify of Legal Description) The sequest (specify of Legal Description) Govt. Lot 3 Lot Block Subdivision Volume 9 Page 264 of Deeds Tax I.D# 347. Additional Legal Description:	Authorized Agent
Applicant: (State what you are asking for) Zoning Dis Sporeland grading for a Jo place an RY on the prope	trict: Lakes Classification d'riveway and permission rty for longer than 4 months.
We, the Town Board, TOWN OF	ehensive and/or Land Use Plan: Yes No
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disappro 3. The form returned to Zoning Department not a copy or fax ** NOTE: Receiving Town Board approval, does not allow the start of construction or business, you must first obtain your permit card(s) from the Planning and Zoning Department. Revised: November 2017	Signed: Chairman Mault Nel

WARRANTY DEED

This deed, made between **Anitra Thorhaug**, Grantor,

and

Daniel D. O'Brien and Rosalie A. O'Brien, husband and wife, as survivorship marital property, Grantee,

Witnesseth, That the said Grantor, for a valuable consideration conveys to Grantee the following described real estate in Bayfield County, State of Wisconsin:

As Described in Attached Addendum/Exhibit A

Parcel No. 04-036-2-49-09-05-4 05-003-35000

Reserving unto the grantor a perpetual, non-exclusive Easement for ingress and egress over and across 20 foot Access Easement as shown on Certified Survey Map No. 1591 as recorded in Volume 9 of Surveys on Page 264, as Document No. 2008R-518421 for the benefit of grantor's remaining lands.

This is not homestead property.

Together with all and singular the hereditaments and appurtenances thereunto belonging; And the said grantor warrants that the title is good, indefeasible in fee simple and free and clear of encumbrances except exceptions, reservations, easements and restrictions of record, and will warrant and defend the same.

Dated this 23'd day of November, 2020.

State of _ Florida

October

Personally came before me this 23rd day of November, 2020, the above named **Anitra Thorhaug** to me known to be the person(s) who executed the foregoing instrument and hereby acknowledge the same.

This instrument drafted by: Michael S. Brandner Midwest Title Group LLC



Notary Public, State of Florid

My Commission Expires: _8/9

2020R-585072

10/26/2020 02:42PM

DENISE TARASEWICZ BAYFIELD COUNTY, REGISTER OF DEEDS

TF EXEMPT #:
RECORDING FEE: \$30.00
TRANSFER FEE: \$78.00

PAGES: 2

Return to:

Daniel D. and Rosalie A. O'Brien 1561 87th Avenue North West Blaine, MN 55449 File No. 155722

MIDWEST Title Group

(800) 673-8710 • www.midwesttitlegroup.com

File Code:

ASH-BayFI

File Number:

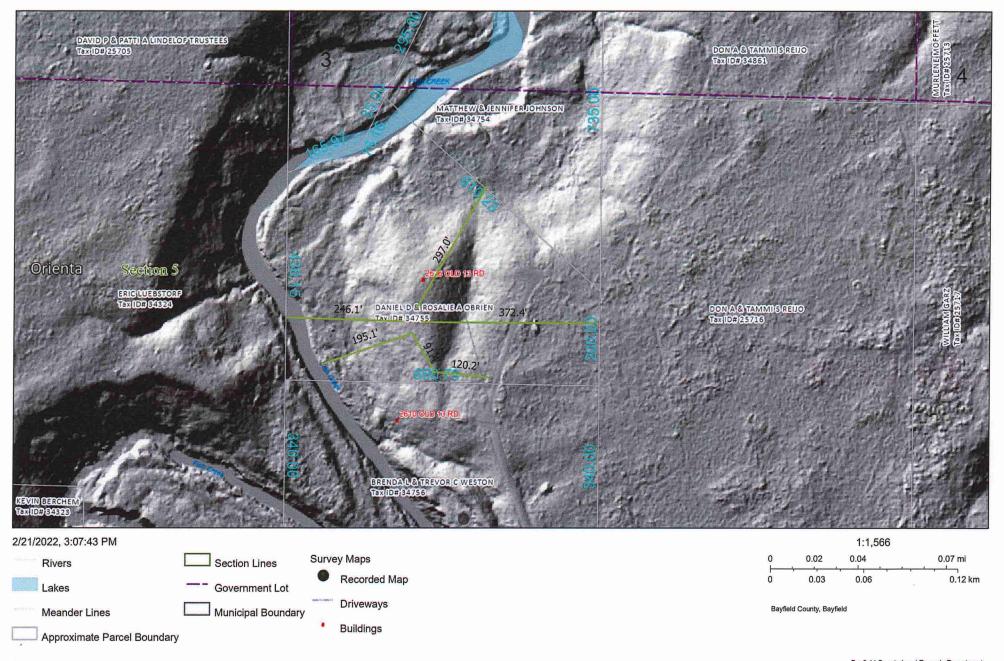
155722

ADDENDUM/EXHIBIT A

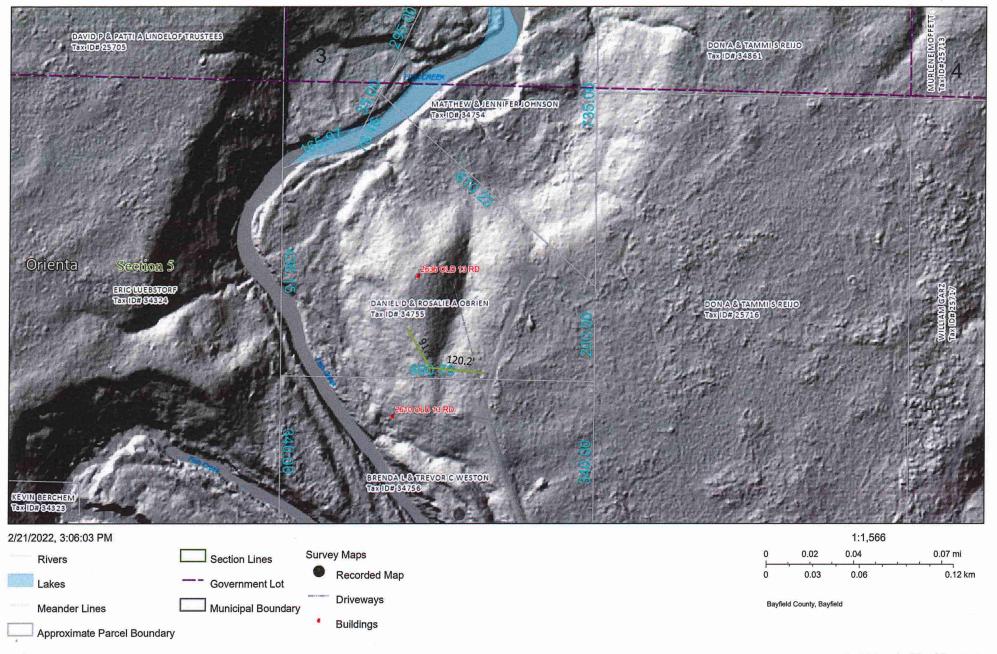
Lot Four (4) of Certified Survey Map No. 1591 as recorded in Volume 9 of Surveys on Page 264, as Document No. 2008R-518421, located in and being part of the Southwest Quarter of the Southeast Quarter (SW1/4-SE1/4), Section Five (5), Township Forty-nine (49) North, Range Nine (9) West, Town of Orienta, Bayfield County, Wisconsin.

TOGETHER WITH a perpetual, non-exclusive easement for ingress and egress over and across 20 foot Access Easement as shown on Certified Survey Map No. 1592 as recorded in Volume 9 of Surveys on Page 266, as Document No. 2008R-518422 for the benefit of the above described lands.

Bayfield County, WI



Bayfield County, WI



Real Estate Bayfield County Property Listing

Today's Date: 2/21/2022

Property Status: Current Created On: 1/14/2008 1:13:42 PM

Description	Updated: 12/11/2020
Tax ID:	34755
PIN:	04-036-2-49-09-05-4 05-003-35000
Legacy PIN:	
Map ID:	
Municipality:	(036) TOWN OF ORIENTA
STR:	S05 T49N R09W
Description:	LOT 4 CSM #1591 IN V.9 P.264

Description: LOT 4 CSM #1591 IN V.9 P.264
(LOCATED IN GOVT LOT 3 & SW SE
LYING S OF HWY 13) IN DOC 2020R585072

Recorded Acres: 6.450
Calculated Acres: 6.457
Lottery Claims: 0
First Dollar: No

First Dollar: No Zoning: (R-2) Residential-2

ESN: 124

Updated: 1/14/2008
STATE
COUNTY
TOWN OF ORIENTA
SCHL-SOUTHSHORE
TECHNICAL COLLEGE

Recorded Documents Updated: 2/27/2009
WARRANTY DEED

Date Recorded: 10/26/2020 2020R-585072

TERMINATION OF DECEDENT'S INTEREST

Date Recorded: 6/4/2013 2013R-549812 1108-161

☐ CERTIFIED SURVEY MAP

Date Recorded: 1/7/2008 2008R-518421 9-264

☐ CERTIFIED SURVEY MAP

Date Recorded: 11/26/2007 2007R-517719 9-240

HISTORY ■ Expand All History White=Current Parcels

White=Current Parcels Pink=Retired Parcels

Tax ID: 25712 Pin: 04-036-2-49-09-05-4 05-003-30000 Leg. Pin: 036103803991
34755 This Parcel Parents Children

Ownership Updated: 12/11/2020
DANIEL D & ROSALIE A OBRIEN BLAINE MN

Billing Address:

DANIEL D & ROSALIE A

OBRIEN

Mailing Address:

DANIEL D & ROSALIE A

OBRIEN

1561 87TH AVENUE NORTH WEST 1561 87TH AVENUE NORTH WEST BLAINE MN 55449 BLAINE MN 55449

* indicates Private Road

2636 OLD 13 RD PORT WING 54865

Property Assessment Updated: 9/26/2016

opuated	: 9/26/2016
DE PROGRAMMA DE SENSE PRIMER SENSE ANTIQUES DE S	
Land	Imp.
7,700	0
2022	Change
7,700	0.0%
0	0.0%
7,700	0.0%
	Land 7,700 2022 7,700 0

Property History	
Parent Properties	Tax ID
<u>04-036-2-49-09-05-4 05-003-30000</u>	25712

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY SIGN SPECIAL (A) - X (Town of Orienta-117/13/2021)
CONDITIONAL BOA -

completed or if any prohibitory conditions are violated.

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22	22-0030			d To: Da i	niel	& Rosalie O	'Brie	1					
Location	on:	1/4	of	1/4	Section	5	Township	49	N.	Range	9	W.	Town of	Orienta
Gov't Lo	575		Lot	4	Bloo	Block	Sul	bdivisio	on	-			CSM#	1591
Reside	Other:		(Disc	laimer):	Any future	expar	6') = 4,000 s	pment						4:
Condit	iion(s):	Dist	urbanc	e must		o th	es to limit ar e minimum eway.					_		
NOTE:		This permit expires one year from date work or land use has not begun.				e of issuance if the authorized construction					Todd Norwood, AZA			ood, AZA
					shall not be m	ot be made without obtaining approval.					Authorized Issuing Off			
			if any of the	of the application information is found					March 3, 2022					
	This permit may be void or revoked if any				if any perforr	performance conditions are not Date								